



## Water Fountain with Bottle Filler Donation Application

### CONTACT INFORMATION

Name: \_\_\_\_\_

Name of Organization/Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Preferred Location: \_\_\_\_\_

☐ Upright (\$3,810) ☐ Attached to Building (\$3,626)

### PAYMENT

I have enclosed my check/money order in the amount of \$ \_\_\_\_\_ Make check payable to "Director of Finance, Howard County"

Charge to my:

☐ Mastercard ☐ VISA Expiration Date: \_\_\_\_\_

Credit Card # \_\_\_\_\_ CVC # \_\_\_\_\_

Name that appears on the card: \_\_\_\_\_

Signature: \_\_\_\_\_



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RECREATION & PARKS



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